

Form 74-011-03-1 (Revised 11/2004)

Schedule Number:

MISSISSIPPI GASOLINE DISTRIBUTOR SCHEDULE OF RECEIPTS

1 Carrier's Name	2 Carrier's FEIN/SSN	3 Mode	4 Origin (TCN or City/State)	5 Point of Destination (City/State or TCN)	6 Purchaser's Name	7 Purchaser's FEIN/SSN	8 Date Shipped	9 Document Number	10 Net Gallons
Page ____ of ____								TOTAL <i>(this page only)</i>	

INSTRUCTIONS

This schedule provides detail in support of the amount(s) shown as receipts on your monthly Mississippi fuels tax return.

You may submit a schedule summarizing your receipts which must be formatted the same as the Distributor's Schedule of Receipts. Complete separate summary schedules for each product type. Group each purchaser together on the schedule. You must submit this schedule by listing individual receipts.

- SCHEDULE NUMBER**..... Enter the schedule number for the product activity you are reporting.
- NAME** Enter the name of the distributor as shown on your monthly Mississippi fuels tax return.
- ACCOUNT NUMBER**..... Enter the distributor's Account Number as shown on your monthly Mississippi fuels tax return.
- REPORT MONTH/YEAR** Enter the month and year for which you are reporting.
- PRODUCT INFORMATION** Check the applicable box for the product type accounted for on this schedule.
- CARRIER'S NAME** Enter the name of the company that transported the product.
- CARRIER'S FEIN/SSN**..... Enter the FEIN or SSN of the company that transported the product.
- MODE** Enter the mode of transport code used to move the product from the terminal or the product origin.
- POINT OF ORIGIN**..... Enter the IRS Terminal Control Number if the product was disbursed from a terminal. Otherwise enter the city and state where the disbursement originated.
- POINT OF DESTINATION** Enter the city and state where the product was delivered. Otherwise, enter the IRS Terminal Control Number if the product was received into a terminal.
- PURCHASER'S NAME** Enter the name of the company that sold you the product.
- PURCHASER'S FEIN/SSN**..... Enter the FEIN or SSN of the company that sold you the product.
- DATE SHIPPED** Enter the date *(month, day, year)* the product was shipped.
- DOCUMENT NUMBER** Enter the terminal manifest number, BOL number, pipeline/barge ticket number, or bulk plant withdrawal invoice number.
- NET GALLONS** Enter the total number of net gallons indicated on the manifest, BOL, pipeline/barge ticket, or bulk plant withdrawal invoice.
- TOTAL *(this page only)***..... Enter the sum of these columns for this page of the report.
- GRAND TOTAL *(all pages)*** Enter the sum of these columns for all pages of this report.

Form 74-072-99-1 (Revised 11/2004)

Schedule Number:

Name	Account Number	Report Month/Year
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<u>Automotive Gasoline:</u>		<u>Aviation Gasoline:</u>		
<input type="checkbox"/> 065-Automotive Gasoline	<input type="checkbox"/> 124-Gasohol	<input type="checkbox"/> 125-Aviation Gasoline	5B.	Gallons Imported – Sold Tax Collected to Non-licensed Distributors, Retailers, or Bulk End-Users
<input type="checkbox"/> 090-Additives			5D.	Gallons Sold Destination State Tax Collected to Licensed Distributors
<input type="checkbox"/> 123-Alcohol			7.	Gallons Exported to Other States
			8.	Gallons Delivered to Armed Forces Tax Free
			13H.	Gallons Sold to Governmental Entities
				J - Truck B - Barge S - Ship R - Rail
				PL - Pipeline

[illegible]

	GRAND TOTAL (<i>all pages</i>)
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MISSISSIPPI GASOLINE DISTRIBUTOR SCHEDULE OF DISBURSEMENTS

1 Carrier's Name	2 Carrier's FEIN/SSN	3 Mode	4 Origin (TCN or City/State)	5 Point of Destination (City/State or TCN)	6 Purchaser's Name	7 Purchaser's FEIN/SSN	8 Date Shipped	9 Document Number	10 Net Gallons
Page ____ of ____								TOTAL <i>(this page only)</i>	

INSTRUCTIONS

This schedule provides detail in support of the amount(s) shown as disbursements on your monthly Mississippi fuels tax return.

You may submit a schedule summarizing your disbursements which must be formatted the same as the Distributor's Schedule of Disbursements. Complete separate summary schedules for each product type. Group each purchaser together on the schedule. You must submit this schedule by listing individual disbursements.

- SCHEDULE NUMBER**..... Enter the schedule number for the product activity you are reporting.
- NAME** Enter the name of the distributor as shown on your monthly Mississippi fuels tax return.
- ACCOUNT NUMBER**..... Enter the distributor's Account Number as shown on your monthly Mississippi fuels tax return.
- REPORT MONTH/YEAR** Enter the month and year for which you are reporting.
- PRODUCT INFORMATION** Check the applicable box for the product type accounted for on this schedule.
- CARRIER'S NAME** Enter the name of the company that transported the product.
- CARRIER'S FEIN/SSN**..... Enter the FEIN or SSN of the company that transported the product.
- MODE** Enter the mode of transport code used to move the product from the terminal or the product origin.
- POINT OF ORIGIN**..... Enter the IRS Terminal Control Number if the product was disbursed from a terminal. Otherwise enter the city and state where the disbursement originated.
- POINT OF DESTINATION** Enter the city and state where the product was delivered. Otherwise, enter the IRS Terminal Control Number if the product was received into a terminal.
- PURCHASER'S NAME** Enter the name of the company that bought the product.
- PURCHASER'S FEIN/SSN**..... Enter the FEIN or SSN of the company that bought the product.
- DATE SHIPPED** Enter the date *(month, day, year)* the product was shipped.
- DOCUMENT NUMBER** Enter the terminal manifest number, BOL number, pipeline/barge ticket number, or bulk plant withdrawal invoice number.
- NET GALLONS** Enter the total number of net gallons indicated on the manifest, BOL, pipeline/barge ticket, or bulk plant withdrawal invoice.
- TOTAL *(this page only)***..... Enter the sum of these columns for this page of the report.
- GRAND TOTAL *(all pages)*** Enter the sum of these columns for all pages of this report.

Form 74-071-99-1 (Revised 11/2004)

Schedule Number:

MISSISSIPPI SPECIAL FUEL DISTRIBUTOR SCHEDULE OF RECEIPTS

1 Carrier's Name	2 Carrier's FEIN/SSN	3 Mode	4 Origin (TCN or City/State)	5 Point of Destination (City/State or TCN)	6 Purchaser's Name	7 Purchaser's FEIN/SSN	8 Date Shipped	9 Document Number	10 Net Gallons
Page ____ of ____								TOTAL <i>(this page only)</i>	

INSTRUCTIONS

This schedule provides detail in support of the amount(s) shown as receipts on your monthly Mississippi fuels tax return.

You may submit a schedule summarizing your receipts which must be formatted the same as the Distributor's Schedule of Receipts. Complete separate summary schedules for each product type. Group each purchaser together on the schedule. You must submit this schedule by listing individual receipts.

- SCHEDULE NUMBER**..... Enter the schedule number for the product activity you are reporting.
- NAME** Enter the name of the distributor as shown on your monthly Mississippi fuels tax return.
- ACCOUNT NUMBER**..... Enter the distributor's Account Number as shown on your monthly Mississippi fuels tax return.
- REPORT MONTH/YEAR** Enter the month and year for which you are reporting.
- PRODUCT INFORMATION** Check the applicable box for the product type accounted for on this schedule.
- CARRIER'S NAME** Enter the name of the company that transported the product.
- CARRIER'S FEIN/SSN**..... Enter the FEIN or SSN of the company that transported the product.
- MODE** Enter the mode of transport code used to move the product from the terminal or the product origin.
- POINT OF ORIGIN**..... Enter the IRS Terminal Control Number if the product was disbursed from a terminal. Otherwise enter the city and state where the disbursement originated.
- POINT OF DESTINATION** Enter the city and state where the product was delivered. Otherwise, enter the IRS Terminal Control Number if the product was received into a terminal.
- PURCHASER'S NAME** Enter the name of the company that sold you the product.
- PURCHASER'S FEIN/SSN**..... Enter the FEIN or SSN of the company that sold you the product.
- DATE SHIPPED** Enter the date (*month, day, year*) the product was shipped.
- DOCUMENT NUMBER** Enter the terminal manifest number, BOL number, pipeline/barge ticket number, or bulk plant withdrawal invoice number.
- NET GALLONS** Enter the total number of net gallons indicated on the manifest, BOL, pipeline/barge ticket, or bulk plant withdrawal invoice.
- TOTAL *(this page only)***..... Enter the sum of these columns for this page of the report.
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Form 74-072-99-1 (Revised 11/2004)

Schedule Number:

MISSISSIPPI SPECIAL FUEL DISTRIBUTOR SCHEDULE OF DISBURSEMENTS

1 Carrier's Name	2 Carrier's FEIN/SSN	3 Mode	4 Point of Origin (TCN or City/State)	5 Destination (City/State or TCN)	6 Purchaser's Name	7 Purchaser's FEIN/SSN	8 Date Shipped	9 Document Number	10 Net Gallons
Page ____ of ____								TOTAL <i>(this page only)</i>	

INSTRUCTIONS

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You may submit a schedule summarizing your disbursements which must be formatted the same as the Distributor's Schedule of Disbursements. Complete separate summary schedules for each product type. Group each purchaser together on the schedule. You must submit this schedule by listing individual disbursements.

- SCHEDULE NUMBER.....** Enter the schedule number for the product activity you are reporting.
- NAME** Enter the name of the distributor as shown on your monthly Mississippi fuels tax return.
- ACCOUNT NUMBER.....** Enter the distributor's Account Number as shown on your monthly Mississippi fuels tax return.
- REPORT MONTH/YEAR** Enter the month and year for which you are reporting.
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- POINT OF DESTINATION** Enter the city and state where the product was delivered. Otherwise, enter the IRS Terminal Control Number if the product was received into a terminal.
- PURCHASER'S NAME** Enter the name of the company that bought the product.
- PURCHASER'S FEIN/SSN.....** Enter the FEIN or SSN of the company that bought the product.
- DATE SHIPPED** Enter the date (*month, day, year*) the product was shipped.
- DOCUMENT NUMBER** Enter the terminal manifest number, BOL number, pipeline/barge ticket number, or bulk plant withdrawal invoice number.
- NET GALLONS** Enter the total number of net gallons indicated on the manifest, BOL, pipeline/barge ticket, or bulk plant withdrawal invoice.
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